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HUMAN SERVICES BUDGET SUMMARY

INTRODUCTION

In his State-of-the-State speech, Governor Michael Dukakis made it clear that this administration views Massachusetts as a community where each of us counts. By extending hope and opportunity to all of our citizens, the Governor said, we are all enriched and ennobled. The Fiscal Year 1987 budget for Human Services stands as a concrete example of the Governor's belief that we should share our economic good fortune with our most vulnerable citizens -- the poor, the homeless, the disabled. We must not forget those who need the helping hand of a compassionate community. At the same time, we want to ensure that we are providing the kind of support and encouragement that allows every citizen the opportunity to become as self-sufficient as possible.

The budget that the Governor sent to the legislature recommends \$389 million in new funding for Human Services, representing an 11.6% increase over last year's budget. Nearly all of that money will be matched by new savings and revenue from our agencies. The budget includes:

- major new initiatives for the poor, and chronically mentally ill and homeless people;
- expanded services for children, especially in day care;
- new funding for the disabled, including the deaf, the head-injured, and disabled young adults turning 22;
- a major increase in funding for AIDS research;
- a commitment to strong management.

Taken together, these new initiatives make the 1987 Human Services budget the most compassionate and responsible in the history of the Commonwealth.

POVERTY

Despite the success of the Massachusetts economy, a small but significant number of our citizens remain in poverty. Once a leader in this area, the federal government has increasingly abdicated responsibility for the problems of the poor. In contrast, Massachusetts has moved quickly to fill the gaps. Over the past few years, we have significantly extended the network of benefits and services available to alleviate the problems of those in poverty.

Most important, we have developed an employment and training program that addresses the causes of poverty, and leads graduates to an independent life.

Since October of 1983, more than 24,000 welfare recipients have received jobs through the Department of Public Welfare's ET Choices Program.

In FY'87, we plan to expand the network of services and benefits for the poor by over \$85 million. Building on the successful record of the past few years, we will focus resources on helping people achieve self-sufficiency through increased educational and employment opportunities, child support collection, and day care subsidies. At the same time, to improve the adequacy of assistance for those still working toward self-sufficiency, we will increase basic welfare grants by 10%, two and a half times the projected inflation for FY'87.

Additional measures will include new money for ET, and programs designed to ensure health care for all.

CHILDREN

Like the FY'86 Budget, this year's budget makes a major investment in our children, especially those who are poor and vulnerable. Over the past several years, Massachusetts has dramatically increased the amount of state-subsidized day care available for low-income working families; taken important steps to ensure day care quality; and undertaken a partnership with the private sector through encouraging the development of employer-supported day care. In FY'85, the Governor convened the Day Care Partnership Project which brought together a diverse group including day care providers, child care experts and educators, state officials, and labor representatives. The Project produced a comprehensive plan to improve day care quality, affordability, and accessibility. In January 1985, the Governor announced a two-year Day Care initiative to implement the Project's recommendations.

Day care is essential for many families striving to reach or maintain self-sufficiency through employment. Many two-parent families need day care because they need two jobs to survive; many single-parent families need day care in order to work at all. In Massachusetts, low-income working parents are eligible for subsidized day care on a sliding scale according to income.



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For FY'87, we recommend:

- \$2 million for 600 new day care slots for low-income working families, including adolescent parents, who without day care, are at high risk of failing to complete high school;
- \$600,000 for 17 new Office for Children licensing staff and services;
- \$600,000 to expand the Child Care Resource and Referral network statewide;
- \$2 million in rate adjustments to address true costs and ensure quality care;
- \$1.2 million for 200 new day care slots for children at risk of abuse or neglect; and
- a salary increase of 19% for contracted day care workers and a \$2 rate increase for family day care systems.

We are also recommending additional funding in several other critical areas:

- \$500,000 for 20 additional group care placements for troubled adolescents;
- \$300,000 for a new aftercare residential program jointly funded by DMH and DYS;
- \$725,000 for expanded services to multiply handicapped children;
- \$2 million in new funding for adolescent mental health services; and
- \$1.1 million for "Healthy Start," a new program to combat infant mortality.

THE DISABLED

This budget also reaches out in new and significant ways to the disabled, especially those who have either been underserved or not even recognized as legitimate clients of the state's adult human services system. In addition, our expansions in 1987 reflect our belief that investing in programs for our disabled citizens is the key to developing self-sufficiency.

Turning 22

Chapter 688, the Massachusetts Turning 22 law, responds to the need for a coordinated, planned transition process for those students leaving special education and unable to enter competitive work situations and lead independent lives. The Bureau of Transitional Planning in the Executive Office of Human

Services provides a centralized capacity to coordinate planning, budgeting and integrated services delivery. After 12 months of operation, the Bureau of Transitional Planning has received over 1,500 student referrals from 225 local school systems. We anticipate that we will reach 2,200 referrals by June 30, 1986. For Fiscal Year 1987, the budget includes \$9.75 million in new funds for students leaving special education.

The Deaf

Although, there are 40,000 deaf people in Massachusetts, few programs in the state address the specific problems the deaf face in learning to live independently.

To address these needs, the FY'87 recommendation for the newly created Commission for the Deaf and Hard of Hearing proposes \$1.3 million in expansion, including:

- \$172,000 for 10 additional staff interpreters to meet emergency interpreter requests in courts, hospitals, and police stations;
- \$330,000 for increased distribution of telecommunications devices for deaf people's phones, and the development of a statewide telephone message relay system. These projects will facilitate communication among deaf people and between the deaf and hearing worlds;
- \$455,500 for a statewide network of case management and independent living services to begin providing the deaf with skills training and support services;
- \$357,500 for expanded support staff and administrative expenses.

Head Injured

Every year in Massachusetts 11,300 people suffer head injuries; 1,700 of those are severe injuries which cause serious cognitive or physical dysfunctions and may cause abusive behavior.

To begin addressing this problem, the Massachusetts Rehabilitation Commission is currently developing a head-injury unit at the state's Shattuck Hospital and a day rehabilitation program at University Hospital. To continue and expand our efforts in FY'87, the budget recommendation for MRC includes:

- \$1.545 million to increase services for the head-injured by 67%;
- \$1,350,000 to serve 18 additional severely-injured clients who are receiving no other services from the state; and

- \$195,000 to operate a 10-bed head-injury unit at the Shattuck Hospital.

AIDS

In April 1984, there were 88 cases of AIDS in Massachusetts. One year later, there were 242 cases. Just four months later, the state had 324 reported cases of AIDS. Our experience parallels the national trend: the number of cases doubles every eight months. Currently, there is no known effective treatment or cure for AIDS, nor is a vaccine available to protect the population against this disease. As the number of cases of AIDS increase and the cost of medical and community care rises, the need for services for victims of AIDS, for activities that will prevent its spread, and for research that will lead to its cure becomes increasingly critical. In the absence of aggressive federal action, the Commonwealth will continue to expand its efforts in these areas.

Massachusetts has responded with speed and concern to the dramatic increase in AIDS in the past year. The Commonwealth has created a special office within the Department of Public Health to coordinate the state's response to AIDS and develop policies and programs to provide guidance to the public, health care workers, and educators on the medical and social implications of AIDS. We were also one of the first states to fund research, allocating \$1.1 million for FY'86 for research on prevention, care and treatment of the AIDS patient, vaccine development, and protection of the Massachusetts blood supply.

The FY'87 recommendation for AIDS includes \$1.577 million in expansion for a total recommendation of \$3.83 million, over twice the '86 funding level. The recommendation includes the following new funding:

- \$397,000 to double the number of individuals receiving blood tests and counseling;
- \$400,000 for home care services and training for home care providers including hospital discharge planners, visiting nurse associations home health agencies, the AIDS Action Committee and patients and their support networks;
- \$200,000 for additional research to expand the work that has become pivotal to the national search for AIDS treatment, a cure, and a vaccine;
- \$210,000 for additional education and prevention activities; and
- \$370,000 to establish 10 AIDS beds at Shattuck Hospital for behaviorally affected AIDS patients who cannot be treated in traditional settings.

MENTAL HEALTH

To improve the Commonwealth's inpatient system, increase residential and vocational opportunities for the chronically mentally ill, and ensure that our mental health system is accessible to all in need, we are proposing a comprehensive five year plan for improving services to chronically mentally ill citizens. This plan builds upon the considerable progress we have made in the past few years in improving staffing in our state hospitals, creating new community programs, and improving management within the Department of Mental Health. It also creates a new vision for mental health care in Massachusetts. This plan will serve as a national model by offering chronically mentally ill individuals and their families a supportive and effective community care network, while bringing a limited number of inpatient beds to the highest standards of care. The FY'87 operating cost of this plan is \$21.3 million. Savings will offset \$1.6 million of this expansion.

This plan will solve the well-recognized problems in Massachusetts' systems of care for chronically mentally ill individuals. The problems are readily apparent. Homeless mentally ill persons wander the streets of our major cities. Inpatient care in the state hospitals and community services are lacking in many parts of the Commonwealth.

The plan has four major goals. Each of these goals is built on the recommendations of the Mental Health Action Project, a 103-person committee formed to reach a new consensus about the needs of the chronically mentally ill. The plan will:

- Provide comprehensive emergency and support services for all chronically mentally ill people living in the Commonwealth.
- Improve dramatically the quality of inpatient care in state hospitals and community mental health centers for acute and chronic clients.
- Increase by 2,500 the number of supported housing beds available for chronically mentally ill persons.
- Continue our program of management improvements in the Department of Mental Health.

The total cost of this plan is \$151.3 million in capital funds and, in the fifth year, \$110 million in operating dollars.

HOMELESSNESS

Over the past three years Massachusetts has dramatically increased services to the homeless, a population which was virtually ignored three years ago. In 1983 there were only two

state funded emergency shelters for the homeless. This winter there are 50. We now support a total of 1755 emergency shelter beds. In FY'87, we recommend \$1.3 million to extend the emergency shelter network to unserved areas of the state. However, our emergency shelters provide only a short-term housing solution for the homeless. Consequently, we are expanding the supply of public housing, targeting rental assistance to homeless households, increasing support and placement services to families in shelters, hotels and motels, and increasing supported housing for the chronic mentally ill.

The FY'87 budget also includes \$1.5 million in new money for transitional residential programs for people who have never successfully maintained independent households, including homeless families, adolescent parents, battered women and pregnant teens. The budget also includes expansion in funding for medical outreach services for general relief recipients, and in day services for homeless individuals.

Governor Dukakis also recently announced a comprehensive package of new services to homeless and mentally ill homeless people in Boston. This package includes the reopening of two units at the Solomon Carter Fuller Mental Health Center and 150 new shelter beds in Boston.

VETERANS

In the last three years, the Dukakis administration has focused new attention on the vocational, health and social services needs of the state's 255,000 Vietnam veterans. Seven Veterans Outreach Centers have opened since July 1983, each providing veterans with an extensive range of services including crisis assistance, drug and alcohol counseling, post traumatic stress disorder counseling, and group therapy. The average center serves over 3,000 veterans per year.

The Governor's 1987 budget includes \$385,000 to develop a new program to serve veterans suffering from Post-Traumatic Stress Disorder. Post-Traumatic Stress Disorder is a result of exposure to significant trauma in the combat theatre. Symptoms include prolonged periods of depression and anxiety, physical and emotional isolation, flashbacks to the traumatic event, and painful survivor guilt. As many as 50,000 veterans may be suffering from this syndrome. Services will include 12 inpatient beds at Rutland Hospital and training for private sector health professionals to help them treat victims of Post-Traumatic Stress Disorder. This program is sponsored jointly by the Department of Public Health and Veterans' Services.

CRIMINAL JUSTICE

Over the past decade, the population of the Massachusetts prison system has increased by 163% resulting in severe overcrowding. In response, the Governor proposed and the legislature approved a major capital plan to eliminate prison overcrowding. The 1987 budget recommendation for the Department of Correction includes:

- \$3.4M to expand bed capacity at three facilities.
- \$2.1M for staff expansion throughout the system.
- \$135,000 to expand a stress management pilot program for prison personnel.
- \$188,000 to expand the department psychological services.
- \$180,000 to improve mental health services at MCI Framingham.
- \$146,000 to improve the services at the Department Segregation Unit (DSU) at MCI Cedar Junction.

The 1987 budget also includes new funding for two new initiatives which will enable the Parole Board to handle increasing caseloads, including a pilot Intensive Parole Supervision program.

In the juvenile justice system, the budget also recommends expansion to meet increasing demands for services. The Department of Youth Services budget includes funding for a new 18-bed mental health group care program, expansion in educational services, and increased overall group care capacity.

MANAGEMENT AND QUALITY OF SERVICES

Caring for poor and vulnerable people in a time of eroding federal support places great demands on the state's ability to manage its human services programs as efficiently as possible. In FY'87, we are meeting this challenge by identifying almost \$270 million in savings and new revenues, more than the FY'87 expansion in human services agency budgets. Savings will be realized through improved automation increased child support, and other management initiatives.

In addition, we have made major new efforts to strengthen the purchase of services system. For doing the most difficult and important jobs in human services -- caring for children in a day care center, supervising mentally retarded adults in a group home, or counseling troubled adolescents in a secure treatment center -- our private human services workers have been paid

unacceptably low wages. Last year, we undertook a major initiative to upgrade those salaries and this year we will take further steps. The FY'87 budget includes a 4% cost of living adjustment (COLA) and additional salary increases which together will provide almost \$40 million in new money for private direct care workers. As a result, we anticipate that day care salaries will rise by 19% and other salaries by 10%.

In addition, the Executive Office of Human Services will continue to work to strengthen the management of the purchase of services system, including enforcing uniform standards and procedures in contracts, and developing more business-like budgets with resulting management savings.

Finally, EOHS will continue implementation of its Early Warning System, which seeks to identify management and financial problems in our non-profit provider agencies before they lead to crisis or insolvency.

